

SWORN STATEMENT ON THE FITNESS AND PROPRIETY OF DIRECTORS/OFFICERS OF A DESIGNATED NON-FINANCIAL BUSINESSES AND PROFESSION (DNFBP)

I, _____(name of the Chief Executive Officer/President/office of equivalent rank), of legal age, under solemn oath, state that:

1. I am the _____(position) of _____(name of institution/business);
2. I certify that _____(name of institution/business) has conducted a fit and proper test on the following directors/officers:

	Name	Position/Designation
a.		
b.		
c.		
d.		

3. I take full responsibility in ensuring that the above-named directors/officers faithfully comply with the provisions of the Anti-Money Laundering Act of 2021 (AMLA), as amended, the Terrorism Financing Suppression Act (TFSA), their Implementing Rules and Regulations, the 2021 AML/CFT Guidelines for DNFBPs, other relevant laws, rules, regulations, and issuances.

(Signature over Printed Name)

Subscribed and sworn to before me, this ___ day of _____, 20___; affiant exhibiting to me his/her _____ issued at _____ on _____.

Doc. No. ___;
Page No. ___;
Book No. ___;
Series of 20___.

(Notary Public)